MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875) SERIAL NO. FILING DATE APPLICANT(S)

(FOR USE WITH FORM PTO-875)									
	,					. (CLAIN	IS ·	
'	AS FILED		AFTER		AFTER 2 MAMENDMENT				
	IND.	DEP.	IND.	DEP.	IND.	DEP.	1	l	
1]	51	
2	<u> </u>							52	
4	 	 					l	5	
5					 -			54 55	
6							1	50	
7							ı	5	
8 9		1-11-						5	
10		- 13						5	
11						 	i	6	
12								62	
13		W ₂					i	6.	
14							i	64	
15		 			· ·		•	6	
16 17		- 11						60	
18		W						68	
19						-		69	
20								70	
21								71	
22							İ	72	
24								-73 74	
25		(1)		7			İ	75	
26		(%)					į	70	
27		(1)						77	
28		-		-				78	
29 30	 -		1:			:		79	
31		(1)					į.	80 81	
32		\ .V					İ	82	
33								83	
34			_ -					84	
35	·	-					•	85	
36 37		(3)						86 87	
38		(T)	1		•			88	
39			2					89	
40								. 90	
41	· ·							91	
42	· · · · ·						·	92 -93	
44		 -						93	
45								95	
46								96	
47		 						97	
48 49								98	
50								99 10	
TOTAL IND.	.•	4	19	4		1		TOTAL	
TOTAL DEP		4	27	4		4		TOTAL	
TOTAL			301)	TOTA	

PTO - 1360 (REV. 11/04)

	AS FILED			TER NDMENT	AFTER 2 MAMENDMENT					
	IND.	DEP.	IND.	DEP.	IND.	DEP.				
_ 51						DEI.				
52										
53										
54 55					5					
56	<u> </u>			<u> </u>		 -				
57			<u> </u>			 				
58	·									
59						<u> </u>				
60										
61 62										
63	<u> </u>									
64										
65										
66										
67										
68 69										
70					<u> </u>					
71										
72						· · ·				
73										
74	L									
75										
76 77										
78										
79										
80										
81										
82	<u> </u>									
83 84		<u>-</u>								
85										
86										
87					•					
88					•					
89	· ·									
90° 91										
92										
93			-	· · · · ·						
94										
95										
96										
97 98										
99					·					
100										
TOTAL IND.		4		*		#				
TOTAL DEP		(4=		<u> </u>				
TOTAL CLAIMS										
U.S. DEPARTMENT of COMMERCE BURY										
					المنتحب	حديه				